

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	/						51					
2		/						52					
3	/							53					
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46								96					
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49								99					
50								100					
TOTAL IND.	3	↓			↓			↓					
TOTAL DEP.	4	←			←			←					
TOTAL CLAIMS	7												

PTO-1364 (REV. 9/03)

U.S. DEPARTMENT OF COMMERCE  
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